



GOVERNMENT OF GUAM

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



LOURDES A. LEON GUERRERO
GOVERNOR, MAGA'HAGA'

JOSHUA F. TENORIO
LT. GOVERNOR, SIGUNDO MAGA'LARI

ARTHUR U. SAN AGUSTIN, MHR
DIRECTOR

LAURENT SF DUENAS, MPH, BSN
DEPUTY DIRECTOR

TERRY G. AGUON
DEPUTY DIRECTOR

RAW CORPORATION

133 RT. 8, B302 TAJ MATAH APT
MAITE, GU

Date: 2/14/2023

RAW CORPORATION UNIT #13302

Name of Establishment

As a result of this inspection your establishment received a:

☐ LETTER OF WARNING

(Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. If we do not receive a written re-inspection request from you, we will conduct a follow-up inspection after ten (10) calendar days from the official receipt of this notice to ensure that corrective measures have been taken.

Failure to correct violations may result in the closure of your establishment pursuant to section 21109(b) of 10GCA, Chapter 21.

☒ NOTICE OF CLOSURE

PERMIT SUSPENDED
DUE TO PEST INFESTATION

(Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. Unlike an establishment who has received a letter of warning, an establishment shall remain closed unless a written request for re-inspection is made. Under 10 GCA Ch. 21 §21109(b), suspension without prior hearing may be imposed until the violation is corrected. You may also request a hearing to the Division of Environmental Health within five (5) calendar days of the date of this notice. When a hearing is requested following a suspension without prior hearing, it shall be discretionary with the Director as to whether the suspension shall be continued pending the hearing.

We look forward to working closely with you as partners in promoting health and sanitary practices on Guam. If you need further assistance, you can reach us at 300-9579 or (fax) 300-9577. Si Yu'us Ma'ase.

Sincerely,

for ARTHUR U. SAN AGUSTIN, MHR
Director

J. MONTANO,
EPHOI
Issued By: _____
Name of EPHO

Received By:
Establishment Representative

**DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIVISION OF ENVIRONMENTAL HEALTH
TEMPORARY WORKFORCE HOUSING INSPECTION REPORT**

REASON			INSPECTION DATE:	ESTABLISHMENT NAME:
Primary		Follow-up	2/14/2023	IAN CORPORATION UNIT # B302
Secondary	2nd	Complaint	TIME IN:	OWNER / OPERATOR:
Tertiary		Other (Specify)	10:25 AM	IAN CORPORATION
GRADE & RATING: PERMIT SUSPENDED DUE TO PEST INFESTATION		SANITARY PERMIT NO: 220003625	TIME OUT: 4:32 PM	LOCATION: 133 RT. 8, B302 TAT MAHAL APT MAITE, GA

Based on the inspection today, the items listed below identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for a hearing be submitted to the Director before the indicated correction date.

*ITEM NO.	REMARKS	DEMERIT	CORRECT BY DATE
	A REGULAR INSPECTION WAS CONDUCTED TODAY. PREVIOUS INSPECTION DATED 9/13/2022 RESULTED IN A GRADE/RATING OF 3/A. PREVIOUS ITEM VIOLATION #34 WAS NOT CORRECTED. THE FOLLOWING WERE OBSERVED:		
17.	BARE WOOD FURNISHINGS BEING USED THROUGHOUT THE UNIT. FACILITY SHALL BE PROPERLY MAINTAINED TO PROMOTE OVERALL SANITATION.	1	N/A
20.	TOILET FACILITY DOOR DOES NOT FULLY CLOSE; GAP UNDER TOILET FACILITY DOOR; PAINT PEELING ON TOILET DOOR; TAPE WITH DARK DISCOLORATION USED TO COVER WINDOW IN TOILET FACILITY. TOILET FACILITY SHALL BE PROVIDED A TIGHT-FITTING DOOR TO PREVENT THE ESCAPE OF OBNOXIOUS ODORS. FIXTURES SHALL BE IN GOOD REPAIR TO FACILITATE PROPER CLEANING.	6	N/A
31.	GREASE ACCUMULATION ON STORAGE CABINETS IN THE KITCHEN AND INSIDE AND AROUND STOVE; DARK DISCOLORATION AND DEEP CUTS ON CUTTING BOARD STORED IN KITCHEN DRAWER; STAINS AND FOOD PARTICLES ON SHELVES IN REFRIGERATOR. ADEQUATE FACILITIES AND PROPER METHODS FOR THE PREPARATION, REFRIGERATION, AND STORAGE OF FOOD SHALL BE IN CONFORMANCE TO THE CURRENT REGULATIONS FOR EATING AND DRINKING ESTABLISHMENTS.	6	N/A

I am the responsible party of the establishment, have read and understand the above violation(s), and am aware of the corrective measures that shall be taken.

*When any of the following items are cited above, they shall be corrected within ten days of this inspection: (15); (16); (19); (20); (22); (30); (32); (36); and (38)	RECEIVED BY (Name and Title) Asset & SIGNATURE:	DEH USE ONLY
	PRINT: Dylan Lee Procure Officer	
	DEH OFFICIAL (Name and Title) SIGNATURE:	
	PRINT: J. MONTANO, EPHOI	

**DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIVISION OF ENVIRONMENTAL HEALTH
TEMPORARY WORKFORCE HOUSING INSPECTION REPORT**

REASON				INSPECTION DATE: 2/19/2023	ESTABLISHMENT NAME: IMN CORPORATION #B302
Primary		Follow-up		TIME IN: 10:25AM	OWNER / OPERATOR: SEE PAGE 1
Secondary	2ND	Complaint			
Tertiary		Other (Specify)			
GRADE & RATING: PERMIT SUSPENDED DUE TO PEST INFESTATION		SANITARY PERMIT NO: 220003625		TIME OUT: 4:32PM	LOCATION:

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*ITEM NO.	REMARKS	DEMERIT	CORRECT BY DATE
34	<p># REPEAT VIOLATION: TWO (2) LIVE NYMPHS UNDER KITCHEN SINK CABINET; TWO (2) LIVE NYMPHS ON CABINET DOOR HINGE UNDER KITCHEN SINK, ONE (1) DEAD COCKROACH BETWEEN CLEAR STORAGE SHELVES IN REFRIGERATOR, CRACKS AROUND FRONT ENTRANCE SCREEN DOOR.</p> <p>BASED ON THESE OBSERVATIONS AND EVIDENCE IT APPEARS AN ACTIVE COCKROACH INFESTATION IS PRESENT IN THE ESTABLISHMENT, WHICH CONSTITUTES AN IMMEDIATE HEALTH HAZARD.</p> <p>ADEQUATE VECTOR CONTROL SHALL BE PROVIDED TO PREVENT THE ENTRY OF PESTS.</p> <p>PHOTOS AND VIDEOS TAKEN.</p> <p>REMOVED "A" PLACARD NO. 04098.</p>	3	N/A

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	PRINT: Dylan Lee Procure Officer		
	DEH OFFICIAL (Name and Title)	SIGNATURE:	
	PRINT: J. MONTANO, EPHO I		

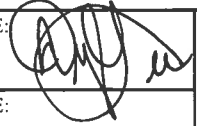
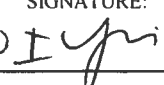
**DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIVISION OF ENVIRONMENTAL HEALTH
TEMPORARY WORKFORCE HOUSING INSPECTION REPORT**

REASON				INSPECTION DATE: <u>2/14/2023</u>	ESTABLISHMENT NAME: <u>IAN CORPORATION #B302</u>
Primary		Follow-up		TIME IN: <u>10:25 AM</u>	OWNER / OPERATOR: <u>SEE PAGE 1</u>
Secondary	<u>2N</u>	Complaint			
Tertiary		Other (Specify)			
GRADE: <u>PERMIT SUSPENDED DUE TO PEST INFESTATION</u>		SANITARY PERMIT NO: <u>220003625</u>	TIME OUT: <u>4:32 PM</u>	LOCATION:	

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<u>1</u>	Based on observations and evidence, it appears that there is an active cockroach infestation in the establishment, in the establishment , which constitutes an imminent health hazard. An imminent health hazard is a significant threat or danger to public health that exists when there is evidence sufficient to show that a circumstance or event creates a situation that requires immediate correction or cessation of operation. The establishment's Sanitary Permit is hereby suspended until all cited violations have been corrected and the following additional requirements to address the pest infestation are met: 1. Written documentation to be submitted daily to DPHSS-DEH from the establishment's primary pest control company (PCC) regarding each of the services provided, and MUST INCLUDE, but not limited to the following: A. Name of pesticide used; B. Number of baits, traps, and other methods used; C. Location of application; and D. Observations of each service conducted. 2. A written cleaning schedule from the establishment that indicates the following: A. Areas that will be cleaned and sanitized; B. How it will be cleaned and sanitized; C. The frequency or how often it will be done. 3. Seal all openings of the establishment to prevent the entrance and travel of the pest with pest-proof materials, such as metal. 4. Remove or prevent any access to food and/or water. 5. Sanitize all hard surfaces and food preparation areas after pest control services.		

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	PRINT: <u>Dorian Lee, Procure Officer</u>	
	DEH OFFICIAL (Name and Title) SIGNATURE: 	
	PRINT: <u>J. MONTANO, EPHO I</u>	

WHITE COPY - DEH OFFICE YELLOW COPY - ESTABLISHMENT



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DIVISION OF ENVIRONMENTAL HEALTH
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Primary		Follow-up		DATE: 2/14/2023	1AW CORPORATION #B302
Secondary	2ND	Complaint		TIME IN:	OWNER / OPERATOR:
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[illegible]

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	DEH OFFICIAL (Name and Title) SIGNATURE: PRINT: <u>J. MONTANO, EPHOT</u> 	

WHITE COPY - DEH OFFICE YELLOW COPY - ESTABLISHMENT